- Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

6680237

| CLAIMS AS FILED - PART I<br>(Column 1)  |   |   |              |                                |               | (Column 2)       |            | SMALL ENTITY TYPE  |                        | OR | OTHER THAN OR SMALL ENTITY |                        |  |
|---|---|---|--------------|--------------------------------|---------------|------------------|------------|--------------------|------------------------|----|----------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   | 12)          |                                |               |                  | - [        | RATE               | FEE                    |    | RATE                       | FEE                    |  |
| FO  | R   |   | NUMBER FILED |                                | NUMB          | ER EXTRA         |            | BASIC FEE          | 385.00                 | OR | BASIC FEE                  | 770.00                 |  |
| то  | TAL CHARGEA   | BLE CLAIMS                                | ر minus 20=  |                                | * 7           |                  |            | X\$ 9=             |                        | OR | X\$18=                     | n                      |  |
| IND   | EPENDENT CL   | AIMS                                      | 3 minus 3 =  |                                | *             | *                |            | X43=               |                        | OR | X86=                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |              |                                |               |                  |            | +145=              |                        | OR | +290=                      |                        |  |
| * If the difference in column 1 is less than zero, enter                              |   |   |              |                                |               | olumn 2          | L          | TOTAL              |                        | OR | TOTAL                      | 89 6                   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)                         |   |   |              |                                |               |                  |            | SMALL E            | NTITY                  | OR | OTHER<br>SMALL E           |                        |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>OUSLY  | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| NDW   | Total   | *   | Minus        | **                             |               | =                |            | X\$ 9=             |                        | OR | X\$18=                     |                        |  |
| Y WEI   | Independent   | *   | Minus        | ***                            | : >154        | =                |            | X43=               |                        | OR | X86=                       |                        |  |
| Ľ   | FIRST PRESE   | NTATION OF MU                             | JLTIPLE DEP  | ENDEN                          | CLAIM         |                  | 1 [        | +145=              |                        | OR | +290=                      |                        |  |
| TOTAL   |   |   |              |                                |               |                  |            |                    |                        |    | TOTAL<br>ADDIT. FEE        |                        |  |
| ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)                                |   |   |              |                                |               |                  |            |                    |                        |    |                            |                        |  |
| ENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID  | IBER<br>OUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total   | *   | Minus        | **                             |               | =                | ]          | X\$ 9=             |                        | OR | X\$18=                     |                        |  |
| ME  | Independent   | *   | Minus        | ***                            | 2124          | =                | [          | X43=               |                        | OR | X86=                       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |   |              |                                | CLAIM         | <u> </u>         | <b>」</b> [ | +145=              |                        | OR | +290=                      |                        |  |
| TO ADDIT. I   |   |   |              |                                |               |                  |            | TOTAL<br>ODIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE        |                        |  |
| (Column 1) (Column 2) (Column 3)  |   |   |              |                                |               |                  |            |                    |                        |    |                            |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·            | HIGH<br>NUM<br>PREVIO<br>PAID  | IBER<br>OUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus        | **                             |               | =                | ]          | X\$ 9=             |                        | OR | X\$18=                     |                        |  |
|   | Independent   | *   | Minus        | ***                            |               | =                | 1 [        | X43=               |                        | OR | X86=                       |                        |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                |               |                  |            | +145=              |                        |    | +290=                      |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |              |                                |               |                  |            | TOTAL              | ,                      | OR | TOTAL                      |                        |  |
| war.  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                |               |                  |            |                    |                        |    |                            |                        |  |